



Rezoning / Map Amendments Application

Return Completed Form To: Planning Department, City of Champaign, 102 N. Neil St., Champaign, IL 61820

www.ci.champaign.il.us

CGTV Cable Channel 5

1. Applicant & Contact Information

Applicant

Full Name _____
Address _____
City, State, Zip _____
Phone _____
Email _____

Primary Contact Person

Full Name _____
Address _____
City, State, Zip _____
Phone _____
Cell Phone _____
Email _____

2. Owner Information

Property Owner

Full Name _____
Address _____
City, State, Zip _____
Phone _____
Email _____

Is the owner a Trust, Corporation, LLC, Not-for-Profit, or Partnership? Yes No

If yes, see Rezoning Application Worksheet for additional submission requirements.

3. Property Information

Address _____

Parcel ID Number _____

Current Property Zoning _____
Requested Zoning _____
Current Land Use _____
Gross Acreage of Property _____
Total Number of Lots _____

Application Checklist

Please address the following items. Additional materials may be required during the review process. Incomplete applications will not be processed. Use the following checklist to confirm that your application is complete.

Complete

Application

1. Applicant & Contact Information.
2. Owner Information, including additional submission requirements as needed.
3. Property Information.
4. Consultant Information.
5. Reason & Justification for Request.
6. Legal Description of Property.
7. Applicant Signature.

Attachments

- A. Deed or other proof of parcel ownership.
- B. List of covenants, easements, or conditions.
- C. Site Plan.

See Rezoning Application Worksheet for additional information regarding these requirements.

Review Fees*:

Zoning Amendments (Flat Fee)	\$95.00
Public Hearing Fee	\$30.00
Public Notice	Direct Cost

*as required in City of Champaign Municipal Code Sec. 26-16.

FOR STAFF USE: Application Complete

Received By: _____

Fee: _____ Date Paid: _____

Case No.: _____



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4. Consultant Information *(if applicable)*

Type: _____
 Name: _____
 Firm: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____

5. Reason & Justification for Request

- A. Have changes (or changing conditions) occurred, since the property zoning was last classified, which justifies a rezoning of the property?
 No Yes — If yes, describe below.

- B. Is there an error in the existing Zoning Map that would be corrected by the proposed rezoning?
 No Yes — If yes, describe below.

6. Legal Description of Property

Please include the complete description as set forth in a deed, mortgage, or other similar legal document. If additional room is needed, please attach a separate sheet titled "Legal Description of Property".

7. Applicant Signature

By signing this application, you are certifying that you have read this application, have provided the necessary documentation as listed under the **Application Checklist**, and that you understand the information listed under the **Notice to Applicant** section.

 Applicant Signature

 Date



Rezoning / Map Amendments Application

Champaign Municipal Code Sec. 37-752. Ordinance Amendments

This is an application to rezone certain property and amend the zoning map. An application for a map amendment may be filed by the City Council, the Plan Commission, the Zoning Board of Appeals, the Planning Director, the property owner, the contract purchaser with the owner's consent, or the owner's agent.

Notice to Applicant

- Petitioner is encouraged to meet with City staff prior to the submission of this application to discuss the application and its requirements.
- City staff will conduct a field check of the subject property to review zoning and land use changes in the area as well as to take photographs.
- A legal notice for the public hearing is required to be published in the News-Gazette not less than 15 days before the meeting. The applicant will be billed directly by the News-Gazette for advertisement of the legal notice (*Champaign Municipal Code Sec. 37-758*).
- The rezoning case will be presented at a public hearing before the Plan Commission.
- The Plan Commission meets on the 1st and 3rd Wednesday of each month. Scheduling your application for these commission meetings will depend on meeting deadlines.
- Planning Staff will mail a notification letter to all neighbors within 250 feet.
- Planning staff will post a sign on the property AND pick it up within 10 days of the completed hearing. **Please do not remove or dispose of the sign.**

Attachments

- A. Deed or other proof of parcel ownership.
- B. Please attach all certified covenants, easements, or conditions which restrict the use of the subject parcel or restrict the structure or what may be placed on the subject parcel. This requirement applies to any covenants, easements, or conditions which are contained in the deed of the subject parcel, including those contained in the subdivision plat or owner's certificate.

I have attached these documents.

There are no covenants, easements, or conditions that relate to this property.
- C. Site Plan (requirements listed at right).

I have attached the site plan.

The Planning Director has waived this requirement and I am attaching a waiver to this effect. (*The Planning Director may waive the requirement for a site plan if it is determined that information on the site plan is generally available from other sources, or that the nature of the request is such that the requirement for a site plan is not necessary to consider the zoning action.*)
- D. Photographs of the subject parcel may benefit the case.

Site Plan Requirements

- Scale.
- North Arrow.
- Property Lines.
- Public streets adjoining property.
- If applicable, existing buildings, fences, access points, parking, and circulation areas.
- Legend.

The site plan shall show all dimensions of lines, buildings, and setbacks, and include building height.

One (1) reproducible site plan of existing conditions on subject property is required by the City of Champaign Municipal Code Sec. 37-756.

